TRANSMITTAL FORM (to be used for all correspondence after initial to	no persons are required to respond to a collection of Application Number 09/ Filing Date July First Named Inventor Kei Art Unit 163	PTO/SB/21 (08-03) Approved for use through 08/30/2003. OMB 0651-0031 d Trademark Office; U.S. DEPARTMENT OF COMMERCE information unless it displays a valid OMB control number. 904,180 y 11, 2001 th D. Allen 36 -
Total Number of Fages III This Submission	5101001050	
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers ✓ Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Remarks	After Allowance communication to Technology Center (TC) Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): RECEIVED OCT 2 9 2003 OFFICE OF PETITIONS
	TURE OF APPLICANT, ATTORNEY	, OR AGENT
Firm or Individual name Signature Kelly L. Quast, Reg. No. 5 Cotober 17, 2003		
CI	ERTIFICATE OF TRANSMISSION/M	AILING
		posited with the United States Postal Service with s, P.O. Box 1450, Alexandria, VA 22313-1450 on

Typed or printed name	Don Mixon		
Signature	Jon Mis	Date	October 17, 2003

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PTO/SB/17 (10-03)

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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Co	omplete if Known
Application Number	09/904,180
Filing Date	July 11, 2001
First Named Inventor	Keith D. Allen
Examiner Name	Daniel M. Sullivan
Art Unit	1636
Attorney Docket No.	R-477

METHOD OF PAYMENT (check all that apply)				FE	E CALCULATION (continued)	
Check Credit card Money Other None	3. AI	ITIDO	ONAI	_ FEE	ES .	7
Deposit Account:	Large I	Entity	Small	Entity	l e e e e e e e e e e e e e e e e e e e	
Deposit 50 4074	Fee Code		Fee Code	Fee (\$)	Fee Description <u>Fee Paid</u>	
Account Number 50-12/1	1051	130	2051	65	Surcharge - late filing fee or oath	ŀ
Deposit Account Deltagen, Inc.	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Name The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	9201	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
	1251	110	2251	55	Extension for reply within first month	
FEE CALCULATION	1252	420	2252	210	Extension for reply within second month	1
1. BASIC FILING FEE Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	1
Fee Fee Fee Fee Description Fee Paid	1254	1,480	2254	740	Extension for reply within fourth month	
Code (\$) Code (\$)	1255	2 010	2255	1.005	5 Extension for reply within fifth month	, [
1001 770 2001 385 Utility filing fee	1401	330	2401	.,	Notice of Appeal	ł
1002 340 2002 170 Design filing fee	1402	330	2402		5 Filing a brief in support of an appeal	
1003 530 2003 265 Plant filing fee	1403	290	2403		5 Request for oral hearing	ı
1004 770 2004 385 Reissue filing fee		1,510	1451			· [
1005 160 2005 80 Provisional filing fee			l l		Petition to institute a public use proceeding	
SUBTOTAL (1) (\$)	1452	110	2452		5 Petition to revive - unavoidable 665.00	1
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453	•	2453		Petition to revive - unintentional	
Fee from	1501	•	2501		5 Utility issue fee (or reissue)	1
Total Claims Extra Claims below Fee Paid Total Claims X X	1502	480	2502		D Design issue fee	1
Independent 2** _	1503	640	2503		Plant issue fee	
Claims	1460	130	1460		Petitions to the Commissioner	
Large Entity Small Entity	1807	50	1807		Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$) Code (\$)	8021	40	802	1 40	Recording each patent assignment per property (times number of properties)	YED
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	5 Filing a submission after final rejection	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be	2003
1204 86 2204 43 ** Reissue independent claims					examined (37 CFR 1.129(b))	1
over original patent	1801	770	2801		Request for Continued Examination (RCF)FCFOFP	:TITION
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	O Request for expedited examination of a design application	
SUBTOTAL (2) (\$)	1	fee (sp				
**or number previously paid, if greater, For Reissues, see above	*Redu	ced by	Basic I	Filing F	Fee Paid SUBTOTAL (3) (\$) 665.00	
SUBMITTED BY					(Complete (if applicable))	5
Name (Print/Type) Kelly L. Quast	R	Registra	tion No	. 50	.141 Telephone 650-569-5100	7
Itelly L. Quast		Harney		32,	, 141 relephone 050-505-5100	

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